

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M. P.		6-13-01
OL.P.E. CLASSIFIER	1/2	13	6/25/01
FORMALITY REVIEW	2	1122	08-14-01
RESPONSE FORMALITY REVIEW	M. H.	65	10-22-01

INDEX OF CLAIMS

✓ ..... Rejected  
 ..... Allowed  
 (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY.

Claim	Date
Final Original	
1	10/19/01
2	10/19/01
3	10/19/01
4	10/19/01
5	10/19/01
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50	10/19/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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09/16/01 10/19/01